

OFFICIAL GAZETTE

PTO/SB/xx (6-95)

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Patent and Trademark Office: US Department of CommerceType a plus sign (+) inside this box →

OO10/PTO Rev. 6/95	US Department of Commerce Patent and Trademark Office	Attorney Docket Number First Named Inventor COMPLETE IF KNOWN	ARC 2363 DOHNER, John W., et al
DECLARATION		Application Number	
<input checked="" type="checkbox"/> Declaration Submitted with Initial Filing OR <input type="checkbox"/> Declaration Submitted after Initial Filing		Filing Date	
		Group Art Unit	
		Examiner Name	

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

IMPROVED METHOD FOR PREVENTING CRYSTAL FORMATION IN A DISPERSION OF A LIQUID IN A MATRIX

(Title of the Invention)

the specification of which

 is attached hereto

OR

 was filed on (MM/DD/YYYY) as United States Application Number or PCT InternationalApplication Number and was amended on (MM/DD/YYYY) (if applicable)

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37 Code of Federal Regulations, § 1.56.

I hereby claim foreign priority benefits under Title 35, United States Code § 119 (a)-(d) or § 365(b) of any foreign application(s) for patent or inventor's certificate, or § 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Copy Attached? Yes	Copy Attached? No
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

 Additional foreign application numbers are listed on a supplemental priority sheet attached hereto:

I hereby claim the benefit under Title 35, United States Code § 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	Additional provisional application numbers are listed on a supplemental priority sheet attached hereto.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Burden Hour Statement: This form is estimated to take .4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments or the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231, and to the Office of Information and Regulatory Affairs, Office of Management and Budget (Project 0651-0032), Washington, DC 20503. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

DECLARATION

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I hereby claim the benefit under Title 35, United States Code § 120 of any United States application(s), or § 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of Title 35, United States Code § 112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations § 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

US Parent Application Number	PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

Additional US or PCT international application numbers are listed on a supplemental priority sheet attached hereto.

As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

Firm Name	ALZA Corporation	Payor (if applicable)	Number 01-1173
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Name	Registration Number	Name	Registration Number
Edward L. Mandell	24,282	Steve F. Stone	20,246
Paul L. Sabatine	22,539	D. Byron Miller	30,661
Felissa H. Cagan	35,089	Michael J. Rafa	38,740

Additional attorney(s) and/or agent(s) named on a supplemental sheet attached hereto.

Please direct all correspondence to:

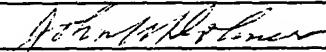
Name: Michael J. Rafa, Agent for Applicants
 Address: 950 Page Mill Road
 Address: (P.O. Box 10950)
 City: Palo Alto State: California Zip: 94303-0802
 County: Santa Clara Telephone: (415) 496-8140 Fax: (415) 496-8048

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:

A petition has been filed for this unsigned inventor.

Given Name: John Middle Initial: W. Family Name: Dohner Suffix:

Inventor's Signature:  Date: 11/21/95

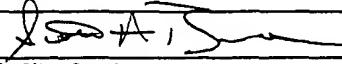
RESIDENCE: City: Portola Valley State: CA Country: USA Citizenship: U.S.

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 City: Portola Valley State: CA Zip: 94028 Country: U.S. Applicant Authority:

Additional inventors are being named on supplemental sheet(s) attached hereto.

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DECLARATION		ADDITIONAL INVENTOR(S) Supplemental Sheet		
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor.		
Given Name: Scott Inventor's Signature: 		Middle Initial: A.	Family Name: Bura	Suffix:
RESIDENCE: City: San Jose		State: CA	Country: U.S.A.	Citizenship: U.S.
POST OFFICE ADDRESS: 1518 Clarita Avenue				
City: San Jose	State: CA	Zip: 95130	Country: US	Applicant Authority:
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor.		
Given Name:		Middle Initial:	Family Name:	Suffix:
Inventor's Signature:		Date:		
RESIDENCE: City:		State:	County:	Citizenship:
POST OFFICE ADDRESS:				
City:	State:	Zip:	County:	Applicant Authority:
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor.		
Given Name:		Middle Initial:	Family Name:	Suffix:
Inventor's Signature:		Date:		
RESIDENCE: City:		State:	County:	Citizenship:
POST OFFICE ADDRESS:				
City:	State:	Zip:	County:	Applicant Authority:
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor.		
Given Name:		Middle Initial:	Family Name:	Suffix:
Inventor's Signature:		Date:		
RESIDENCE: City:		State:	County:	Citizenship:
POST OFFICE ADDRESS:				
City:	State:	Zip:	County:	Applicant Authority:
<input type="checkbox"/> Additional inventors are being named on supplemental sheet(s) attached hereto.				